Disclosure Re	nort Cover			Amene		
•	neral report and committee i	nformation, must be	signed and submitted a	اسا ا along with other de	Yes etailed forms.	No No
Do not use this form	to update information					
1. Committee Infor	mation					
a. Full Name	£.	<u> </u>	<u> </u>	c. 11) Number	North Salant
Committee		enda Byrd	MCMillon			
b. Mailing Address (incl	ude City, State and Zip Code)			d. D	ate Filed	
3913	Widgeon was	40172				
Way	Chaw, M.C. o	18113		e. P	hone Number	
		., . 4. Period	End Date			
2. Report Year	3. Period Start Date (mm/d	(mm/dd/yy)	5. Tro	easurer Full Name		
	09/26/17	10/23	/17 Bro	enda Byrd-1	refullon	
6. Type of Committ		9. Type of Report		ype of report from		
Candidate Campa PAC	ign Party Referendum	Municipal	State/County		erendum	
Independent	Joint Fundraiser	Organizationa Thirty-five day	1	ionai	Organizational Pre-referendum	
Expenditure Legal Expense Fu		Timiy-nve da	Quarterry		Fic-referendum	
7. Type of Fund	(if applicable, check one)	Pre-primary	Firs	. _	Final	
Booster Fund"		Pre-election	Seco	; <u></u>	Supplemental Final	
Building Fund		Pre-runoff Semi-annual	This		Annual Special	
		Mid Year		· hand	Special	
Other:		Year End			Special Report Na	ıme
8. Number of Funda	raisers this Report	Final Special	Yea	r End		
o. Humber of a undi	ances the report	ореста	Special			
11. Account Inform	ation		11. Account Informa	ıtion		
a. Financial Institution F	ull Name		a. Financial Institution F	all Name		
b. Purpose	c. Account Code		b. Fee force CEIV		Account Code	
			OCT 3 0 20			
	d. Period Begin Balance		Union Co. Board of Elections		Period Begin Balance	1991997
	\$ Union Co. Board of Electronic			\$		
CERTIFICATION						
I certify that the Com	mittee or Fund is in compli	ance with all applica	ble provisions of Artic	le 22A, 22B, & 22	D-22M of Chapter	163 of
is complete, true and	tes and that no funds are co correct and that I have been	mmingled with pron trained by the NC.S	nonted or other non-disc State Board of Elections	Hosed Tunds, 1 Turti	her certify that this	report
brenda	Byrd- MCH, 110n	B	words Byld 911	Hell 10	127/201	7_
EOD OFFICE HEE O	Printed Name of Signer	S	ignature of Appointed Treasu	ırer	/ Date	. 10. 93315 44.5
FOR OFFICE USE O Date Received:	10/30/17	Employee:	Klaumin		ery Method	
Date Postmarked	N/A	Employee:	Klaum	ンへ	Normal Mail Registered Mail	
Date I usiliarket	SOURCES CONTROL OF THE ANALYSIS AND ANALYSIS ANALYSIS AND ANALYSIS ANA	ismpioyee.			Hand Delivered	
Date Scanned:		Employee:	Marine Nava V State (Marine)		Electronically Filed Signer has not received	
Date Data Entere	d:	Employee:	MANAGE AND ADMINISTRATION OF THE PROPERTY OF T		mandatory training	
Please Note: This	s form cannot be used to am	end committee infor	mation such as the cor	mittee address tra	agurer accietant tra	agurar
			ion, or account informa		aoaror, assistant tiv	usurer,
	You must amend the Stater	nent of Organization	(CRO-2100A-E) to m	ake committee cha	nges.	

Detailed Summary

Amendment

Yes No

Use this form to summarize all disclosure reporting forms and to to	tal monetary	information.					
1. Committee Full Name (and Fund if applicable) 2. Typ	e of Report		3. ID Number				
Brenda Byrd McMillon Pre-Election Report							
Start of Election Cycle: January 1,	<u> </u>	Total this	Total this				
		Reporting Period	Election Cycle				
4) Cash on Hand at Start		S O	\\$ <i>O</i>				
RECEIPTS							
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$				
- 6) Contributions from Individuals	(CRO-1210)	\$ 377.44	\$ 2317.86				
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$				
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$				
9) Loan Proceeds	(CRO-1410)	\$	\$				
10) Refunds/Reimbursements To the Committee	(CRO-1240)	\$	\$				
11) Other Receipt Sources		#OEN/EF					
11a) Interest on Bank Accounts	(CRO-1250)	is-OL-IVE	\$				
11b) Contributions from Not-for-Profit Organizations	(CRO-1250)	€007 3 0 2017	\$				
11c) Outside Sources of Income	(CRO-1250)	\$ ion Co. Board of Electio	ns \$				
11d) Legal Expense Fund – Other Sources	(CRO-1270)	\$	\$				
11 e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$				
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d an	ıd IIe)	\$ 377.44	\$ 23.17.96				
<u>EXPENDITURES</u>							
13) Disbursements							
13a) Operating Expenditures	(CRO-1310)	\$	\$				
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$				
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$				
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$				
15) Loan Repayments	(CRO-1420)	\$	\$				
16) Refunds/Reimbursements From the Committee	(CRO-1320)	\$	\$				
17) In-Kind Contributions	(CRO-1510)	\$ 377.44	\$ 2317.96				
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and	H 17)	\$	\$				
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line	: 18)	S <i>O</i>					
ADDITIONAL INFORMATION		<u> </u>					
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$					
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$					
22) Debts and Obligations owed By the Committee	(CRO-1610)	\$					
23) Debts and Obligations owed To the Committee	(CRO-1620)	\$					
24) Account Transfers Within the Committee	(CRO-1720)	\$					
25) Administrative Support	(CRO-1710)	\$	\$				
26) Forgiven Loans	(CRO-1440)	\$	\$				
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$	\$				
28) Contributions to be Refunded	(CRO-1215)	\$	\$				

Contri	ibutions fror	n Individuals		Pg	of	_/	Amendment Yes No
Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used							
1. Committee Full Name (and Fund if applicable) 2. ID Number							
Cow	mittee .	to Bleck t	Xer	da Byrd M	Millon		
3. Contributor Information			Add Remove				
	ne, Mailing Address & city, state, & zip)	& Phone		b. Job Title/Profession		d. Comments	
1 110	ins A B	ronda McMi	llox				
2912 Wideson War			c. Employer's Name/Spe	cific Field			
Lucius & Brenda McMillon 3913 Widgeon Way Waxhaw, N.C. 28173				e. Election Sum to Date			
W	aprilati,					\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy	уу)	k. Amount
		Creditional	(,)	a. Kine Cards	09/30/3	2o17	\$ 205.06
		Creditional		alking cards	10/16/2	2017	\$ 172.38
		O'EA' CAIA	· ·	rai ring culas	10/0		\$
3 Contri	 butor Informatio			Add Rem	OVE		Ψ
a. Fuil Nan	ne, Mailing Address &	& Phone		b. Job Title/Profession		d. Comments	
(include	city, state, & zip) REC	:FIVED					
				c. Employer's Name/Spe	cific Field		
OCT 3 0 2017							
Union Co. Board of Elections					Sum to Date		
	F				****	\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	Gind Description	j. Date (mm/dd/yy	yy)	k. Amount
Ш							\$
							\$
							\$
3. Contri	butor Informatio	n		Add Rem	ove		
	ne, Mailing Address & city, state, & zip)	k Phone		b. Job Title/Profession		d. Comments	
(memae	city, state, or zip)						
				c. Employer's Name/Spe	cific Field		
						e. Election Su	um to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-K	ind Description	j. Date (mm/dd/yy)	yy)	k. Amount
							\$
							\$
							\$
4. Total	only this Page	3				\$	377.44
	of ALL CRO	5545 - Capie Nichologo (1941) 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 1945 - 194				Α.	377.44 377.44
		Detailed Summary Page Ck	0-1100			\$	077.44

Amendment

In-Kind Contributions		1	Pg of	/	Yes No	
Use this form to report non-monetary contributions, donations, go				e comn	nittee or fund.	
Use CRO-1215 if In-Kind Contributions were or will be refunded 1. Committee Full Name (and Fund if applicable)	WILITI	/ day	/8.	2. ID	Number	
11 0 0	Mac	` ı l	۸.			
	≀ (⊆[(Remove	Caperago and Services	on			
a. Full Name, Mailing Address & Phone	Contributor	c. Comments				
(include city, state, & zip)			vidual			
Lucius & Brenda McMillon 3913 Widgeon Way Waxhaw, n.c. 28173		Cano Party	didate y			
3913 Widgeon Way		PAC Referendum		d Flo	otion Sum to Date	
Waxhaw, n.c. 28173	Referendum Other Receipt Source		d. Election Sum to Date			
e. Description		:::::	f. Date (mm/dd/yy	yy)	g. Fair Market Amount	
Walking Cards			09/30/2	017	\$ 205.06	
Walking Cards Walking Cards			10/16/2	017	\$ 172.38	
					\$	
3. Contributor Information Add F	Remove					
a. Full Name, Mailing Address & Phone	b. Typ		Contributor	c. Con	aments	
(include city, state, & zip)	 		vidual didate			
RECEIVED		Party				
		PAC				
OCT 3 0 2017		Referendum Other Receipt Source		d. Election Sum to Date		
Union Co. Board of Elections				\$		
e. Description	********		f. Date (mm/dd/yy	yy) g. Fair Market Amount		
					\$	
					\$	
					\$	
	Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)	b. Typ		Contributor vidual	e. Con	nments	
(include city, state, & zip)		Candidate				
		Part	•			
	\parallel	PAC Referendum		d. Election Sum to Date		
			er Receipt Source	\$		
Barrier Artist to the control of the			f Data (mm/dd/m	<u> </u>	a Tolu Moulest Amount	
e. Description			f. Date (mm/dd/yy)	yy)	g. Fair Market Amount	
					\$	
					\$.	
					\$	
4. Total only this Page				\$	377.44	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)				\$	377.44	

In-Kind Contributions

Amendment